

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File	Wit	th:				
City	or	Town	Clerk	or	Election	Commission

10/1/2011

Reporting Period - Beginning: 1/1/2011 Ending:	10/31/2011
Type of report: Pre-election	
SaveTheCPA	
Committee Name	
Steven Lucas	
Name of Committee Treasurer	
PO Box 60311	CHY CLEAKS OFFICE
Florence , MA 01062	NORTHAGPION, MA 01060
Committee Address	

SUMMARY BALANCE INFORMATION

Ending Balance from previous report:	\$0.00
Total receipts this period:	\$3,375.00
Subtotal:	\$3,375.00
Total expenditures this period:	\$1,037.00
Ending Balance:	\$2,338.00
Total inkind contributions this period:	\$0.00
Total outstanding liabilities:	\$0.00
Name of bank(s) used: Florence Savings	

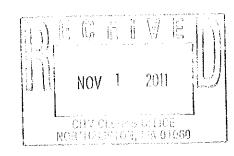
Affidavit of Committee Treasurer:

I certify that I have examined this report, including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity including all contributions, loans, receipts, expenditures, disbursements, inkind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Treasurer's signature (in ink)

Date



Schedule A: Receipts

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

Date	Name and Residential Address	Amount	Occupation and Employe
10/23/2011	Adams, Brian 38 Arlington Street Northampton, MA 01060	\$100.00	
10/6/2011	Baker, Kathleen 11 Kensington Ave Northampton, MA 01060	\$150.00	
10/10/2011	Baskin, Lisa Po Box 314 Leeds, MA 01053	\$250.00	Retired N/a
10/23/2011	Fradkin,, Joan 28 Crabapple Lane Northampton, MA 01060	\$100.00	
10/17/2011	Franks, Adele 123 Black Birch Trail Florence, MA 01062	\$100.00	
10/23/2011	Friends of Hampshire County Homeless Po Box 30398 Florence, MA 01062 Stanley Zewski	\$250.00	
10/4/2011	Horner, John W 46 Ladyslipper Lane Florence, MA 01062	\$500.00	Retired N/a
10/10/2011	Horton, Nicholas 341 Prospect Street Northampton, MA 01060	\$100.00	
10/17/2011	Jeffs Lombard, Elizabeth 39 Munroe Street Northampton, MA 01060	\$100.00	
10/14/2011	Jones, T. Stephen 123 Black Birch Trail Florence, MA 01062	\$200.00	Physician Retired

Schedule D: Liabilities

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as the liabilities incurred during this reporting period.

Date To Whom Due

Amount Purpose

Total Outstanding Liabilities

\$0.00

Date	Name and Residential Address	Amount	Occupation and Employe
8/24/2011	Lucas, Steven 218 Turkey Hill Rd Florence, MA 01062	\$100.00	
10/12/2011	Narkewicz, David 31 South Park Terrace Northampton, MA 01060	\$100.00	
10/10/2011	Northampton League of Women Voters PO Box 39 Leeds, MA 01053 MarySue Bonley	\$500.00	
10/17/2011	Schwartz, Pamela 22 Columbus Street Northampton, MA 01060	\$100.00	
	zed Receipts mized Receipts pts	\$2,650.00 \$725.00 \$3,375.00	

Schedule B: Expenditures

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures over \$50 and under may be added together from committee records, and reported on line 13.

Date	Name and Address	Amount	Purpose
10/10/2011	Mantis Graphics 1 Adams Street Easthampton, MA	\$478.25 01027	Balance Lawn Signs
10/6/2011	Mantis Graphics 1 Adams Street Easthampton, MA		50% Lawn Signs
10/4/2011	Paradise Copies 21 Conz Street Northampton, MA	\$80.75	Printing, Flyers
	zed Expenditures mized Expenditures ditures	\$1,037.00 \$0.00 \$1,037.00	

Schedule C: "Inkind" Contributions

Please itemize contributors who have made inkind contributions of more than \$50. In-kind contributions \$50 and under may be added together, from the committee's records, and included in line 16. An exception to this is that all contributions (under or over \$50) given by persons who have contributed more than \$50 in the calendar year must be itemized. Please report the names and addresses of contributors. Also give the occupation and employer of any contributor who has given an aggregate amount of \$200 or more in the calendar year.

Date Name and Residential Address	Value Description Occupation/Employer	£
Total Itemized Inkind Contributions Total Unitemized Inkind Contributions Total Inkind Contributions	\$0.00 \$0.00 \$0.00	